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Substitute for form 1449/PTO <h1>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</h1> <i>(Use as many sheets as necessary)</i>				<i>Complete if Known</i>	
				Application Number	10/506,461-Conf. #8945
				Filing Date	July 11, 2005
				First Named Inventor	Shigeru Sugaya
				Art Unit	2617
				Examiner Name	F. A. Casca
				Attorney Docket Number	SONYJP 3.3-1048
Sheet	2	of	2		

[illegible]

Examiner Signature	/Fred Casca/	Date Considered	08/26/2008
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹Applicant's unique citation designation number (optional). ²Applicant is to place a check mark here if English language Translation is attached.

ALL REFERENCES CONSIDERED EXCEPT WHERE LINED THROUGH. /F.C./